ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | MM | | 12 3 99 |
| O.I.P.E. CLASSIFIER | | | 12-8-99 |
| FORMALITY REVIEW | ERW | 70622 | 12-23-99 |

## INDEX OF CLAIMS

✔ .................................. Rejected     N ................................... Non-elected
= ................................... Allowed     I ................................... Interference
– (Through numeral)... Canceled     A ................................... Appeal
÷ ................................... Restricted     O ................................... Objected

| Claim | | Date | Claim | | Date | Claim | | Date |
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If more than 150 claims or 10 actions
staple additional sheet here